

# Buyer Info Packet

103 TRADEWINDS TERR

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Seller's Property Disclosure - Residential



Notice to Licensee and seller: Only the Seller should fill out this form.

Notice to Seller: Florida law requires a Seller of a home to disclose to the Buyer all known facts that materially affect the value of the property being sold and that are not readily observable or known by the Buyer.

Notice to Buyer: The following representations are made by Seller and not by any real estate licensee. This disclosure is not a guaranty or warranty of any kind.

Seller makes the following disclosure regarding the property described as: 103 Tradewinds Terrace Indian Lakes, FL 32903 (the "Property")

The Property is [X]owner occupied [ ]tenant occupied [ ]unoccupied (If unoccupied, how long has it been since Seller occupied the Property? \_\_\_\_\_)

1. Structures; Systems; Appliances
(a) Are the structures including roofs: ceilings; walls; doors; windows; foundation; and pool, hot tub, and spa, if any, structurally sound and free of leaks? [X] Yes [ ] No [ ] Don't Know
(b) Is seawall, if any, and dockage, if any, structurally sound? [ ] Yes [ ] No [ ] Don't Know
(c) Are existing major appliances and heating, cooling, mechanical, electrical, security, and sprinkler systems, in working condition, i.e., operating in the manner in which the item was designed to operate? [X] Yes [ ] No [ ] Don't Know
(d) Does the Property have aluminum wiring other than the primary service line? [ ] Yes [X] No [ ] Don't Know
(e) Are any of the appliances leased? If yes, which ones: \_\_\_\_\_ [ ] Yes [X] No [ ] Don't Know
(f) If any answer to questions 1(a) - 1(c) is no, please explain: \_\_\_\_\_

2. Termites; Other Wood-Destroying Organisms; Pests
(a) Are termites; other wood-destroying organisms, including fungi; or pests present on the Property or has the Property had any structural damage by them? [ ] Yes [X] No [ ] Don't Know
(b) Has the Property been treated for termites; other wood-destroying organisms, including fungi; or pests? [ ] Yes [X] No [ ] Don't Know
(c) If any answer to questions 2(a) - 2(b) is yes, please explain: \_\_\_\_\_

3. Water Intrusion; Drainage; Flooding
(a) Has past or present water intrusion affected the Property? [ ] Yes [X] No [ ] Don't Know
(b) Have past or present drainage or flooding problems affected the Property? [ ] Yes [X] No [ ] Don't Know
(c) Is any of the Property located in a special flood hazard area? [ ] Yes [X] No [ ] Don't Know
(d) Is any of the Property located seaward of the coastal construction control line? [ ] Yes [X] No [ ] Don't Know
(e) Does your lender require flood insurance? [ ] Yes [X] No [ ] Don't Know
(f) Do you have an elevation certificate? If yes, please attach a copy. [ ] Yes [X] No [ ] Don't Know
(g) If any answer to questions 3(a) - 3(d) is yes, please explain: \_\_\_\_\_

1 Johnson v. Davis, 480 So.2d 625 (Fla. 1985).

Seller (Signature) and Buyer (Signature) ( ) acknowledged receipt of a copy of this page, which is Page 1 of 4.

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	Yes	No	Don't Know
<b>4. Plumbing</b>			
(a) What is your drinking water source? <input checked="" type="checkbox"/> public <input type="checkbox"/> private <input type="checkbox"/> well <input type="checkbox"/> other			
(b) Have you ever had a problem with the quality, supply, or flow of potable water?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Do you have a water treatment system? If yes, is it <input type="checkbox"/> owned <input type="checkbox"/> leased?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Do you have a <input checked="" type="checkbox"/> sewer or <input type="checkbox"/> septic system? If septic system, describe the location of each system: _____			
(e) Are any septic tanks, drain fields, or wells that are not currently being used located on the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(f) Are there or have there been any defects to the water system, septic system, drain fields or wells?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(g) Have there been any plumbing leaks since you have owned the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(h) Are any polybutylene pipes on the Property?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(i) If any answer to questions 4(b), 4(c), and 4(e) - 4(h) is yes, please explain: _____			
<b>5. Roof and Roof-Related Items</b>			
(a) To your knowledge, is the roof structurally sound and free of leaks?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) The age of the roof is <u>2005</u> years OR date installed _____			
(c) Has the roof ever leaked during your ownership?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) To your knowledge, has there been any repair, restoration, replacement (indicate full or partial) or other work undertaken on the roof? If yes, please explain: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) Are you aware of any defects to the roof, fascia, soffits, flashings or any other component of the roof system? If yes, please explain: <u>Ridge vents (3) replaced</u> <u>New cap on chimney ridge vents leaked</u> <u>so replaced them!</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>6. Pools; Hot Tubs; Spas</b>			
<b>Note:</b> Florida law requires swimming pools, hot tubs, and spas that received a certificate of completion on or after October 1, 2000, to have at least one safety feature as specified by Section 515.27, Florida Statutes.			
(a) If the Property has a swimming pool, hot tub, or spa that received a certificate of completion on or after October 1, 2000, indicate the existing safety feature(s): <input type="checkbox"/> enclosure that meets the pool barrier requirements <input type="checkbox"/> approved safety pool cover <input type="checkbox"/> required door and window exit alarms <input type="checkbox"/> required door locks <input type="checkbox"/> none			
(b) Has an in-ground pool on the Property been demolished and/or filled?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>7. Sinkholes</b>			
<b>Note:</b> When an insurance claim for sinkhole damage has been made by the Seller and paid by the insurer, Section 627.7073(2)(c), Florida Statutes, requires the Seller to disclose to the Buyer that a claim was paid and whether or not the full amount paid was used to repair the sinkhole damage.			
(a) Does past or present settling, soil movement, or sinkhole(s) affect the Property or adjacent properties?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Has any insurance claim for sinkhole damage been made? If yes, was the claim paid? <input type="checkbox"/> yes <input type="checkbox"/> no If the claim was paid, were all the proceeds used to repair the damage? <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) If any answer to questions 7(a) - 7(b) is yes, please explain: _____			

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10. Governmental, Claims and Litigation
- (a) Are there any existing, pending or proposed legal or administrative claims affecting the Property?  Yes  No  Don't Know
  - (b) Are you aware of any existing or proposed municipal or county special assessments affecting the Property?  Yes  No  Don't Know
  - (c) Is the Property subject to any Property Assessed Clean Energy (PACE) assessment per Section 163.08, Florida Statutes?  Yes  No  Don't Know
  - (d) Are you aware of the Property ever having been, or is it currently, subject to litigation or claim, including but not limited to, defective building products, construction defects and/or title problems?  Yes  No  Don't Know
  - (e) Have you ever had any claims filed against your homeowner's insurance Policy?  Yes  No  Don't Know

9. Environmental
- (a) Was the Property built before 1978?  Yes  No  Don't Know
  - If yes, please see Lead-Based Paint Disclosure.
  - (b) Does anything exist on the Property that may be considered an environmental hazard, including but not limited to, lead-based paint; asbestos; mold; urea formaldehyde; radon gas; methamphetamine contamination; defective drywall; fuel, propane, or chemical storage tanks (active or abandoned); or contaminated soil or water?  Yes  No  Don't Know
  - (c) Has there been any damage, clean up, or repair to the Property due to any of the substances or materials listed in subsection (b) above?  Yes  No  Don't Know
  - (d) Are any mangroves, archaeological sites, or other environmentally sensitive areas located on the Property?  Yes  No  Don't Know
  - (e) If any answer to questions 9(b) - 9(d) is yes, please explain: \_\_\_\_\_

8. Homeowners' Association Restrictions; Boundaries; Access Roads
- (a) Is membership in a homeowner's association mandatory or do any covenants, restrictions or restrictions (CCRs) affect the Property? (CCRs include deed conditions or restrictions (CCRs) affect the association's official records and/or the CCRs before making an offer to purchase. These documents contain information on significant matters, such as recurring dues or fees; special assessments; capital contributions, penalties; and architectural, building, landscaping, leasing, parking, pet, resale, vehicle and other types of restrictions.  Yes  No  Don't Know
  - (b) Are there any proposed changes to any of the restrictions?  Yes  No  Don't Know
  - (c) Are any driveways, walls, fences, or other features shared with adjoining landowners?  Yes  No  Don't Know
  - (d) Are there any encroachments on the Property or any encroachments by the landowners?  Yes  No  Don't Know
  - (e) Are there any improvements on other lands?  Yes  No  Don't Know
  - (f) Are there boundary line disputes or easements affecting the Property?  Yes  No  Don't Know
  - (g) Are you aware of any existing, pending or proposed legal or administrative action affecting homeowner's association common areas (such as clubhouse, pools, tennis courts or other areas)?  Yes  No  Don't Know
  - (h) Have any subsurface rights, as defined by Section 689.29(3)(b), Florida Statutes, been severed from the Property?  Yes  No  Don't Know
  - (i) If yes, is there a right of entry?  Yes  No  Don't Know
  - (j) Are access roads  private  public? If private, describe the terms and conditions of the maintenance agreement: \_\_\_\_\_
  - (k) If any answer to questions 8(a) - 8(g) is yes, please explain: \_\_\_\_\_

- |  | Yes                      | No                                  | Don't Know               |
|--|--------------------------|-------------------------------------|--------------------------|
| (f) Are there any zoning violations or nonconforming uses?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (g) Are there any zoning restrictions affecting improvements or replacement of the Property?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (h) Do any zoning, land use or administrative regulations conflict with the existing use of the Property?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (i) Do any restrictions other than association or flood area requirements, affect improvements or replacement of the Property?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (j) Are any improvements located below the base flood elevation?   | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (k) Have any improvements been constructed in violation of applicable local flood guidelines?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (l) Have any improvements to the Property, whether by you or by others, been constructed in violation of building codes or without necessary permits?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (m) Are there any active permits on the Property that have not been closed by a final inspection?  | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| (n) Is there any violation or non-compliance regarding any unrecorded liens; code enforcement violations; or governmental, building, environmental and safety codes, restrictions or requirements? | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

(o) If any answer to questions 10(a) - 10(n) is yes, please explain: Claim when ridge vent leaked - (1) replaced all (3)

**11. Foreign Investment in Real Property Tax Act ("FIRPTA")**

- (a) Is the Seller subject to FIRPTA withholding per Section 1445 of the Internal Revenue Code?  Yes  No  Don't Know
- If yes, Buyer and Seller should seek legal and tax advice regarding compliance.

12.  (If checked) Other Matters; Additional Comments The attached addendum contains additional information, explanation, or comments.

Seller represents that the information provided on this form and any attachments is accurate and complete to the best of Seller's knowledge on the date signed by Seller. Seller authorizes listing broker to provide this disclosure statement to real estate licensees and prospective buyers of the Property. Seller understands and agrees that Seller will promptly notify Buyer in writing if any information set forth in this disclosure statement becomes inaccurate or incorrect.

Seller: John C. Nadeau (signature) / JOHN C. NADEAU (print) Date: 2-27-2026

Seller: Joanne Nadeau (signature) / JOANNE NADEAU (print) Date: 2-23-2026

Buyer acknowledges that Buyer has read, understands, and has received a copy of this disclosure statement.

Buyer: \_\_\_\_\_ / \_\_\_\_\_ Date: \_\_\_\_\_  
 (signature) (print)

Buyer: \_\_\_\_\_ / \_\_\_\_\_ Date: \_\_\_\_\_  
 (signature) (print)

Seller JN and Buyer \_\_\_\_\_ acknowledge receipt of a copy of this page, which is Page 4 of 4.  
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**PERSONAL PROPERTY INVENTORY**

Seller 1: <p style="text-align: center;">John C. Nadeau</p>	Seller 2: <p style="text-align: center;">Joanne Nadeau</p>
Property Address: <p style="text-align: center;">103 TRADEWINDS TERR INDIALANTIC FL 32903</p>	

**This addendum is referenced in the Contract for Purchase and Sale between parties that have signed below and is incorporated therein by reference. The personal property included in the purchase price and listed below shall be the same property existing on the property as of the date of initial offer, with no substitutions unless agreed upon by the parties in writing. Be as specific as possible. Make an entry for EACH item.**

**YES = It's on the property and WILL CONVEY | NO = It's on the property and WILL NOT convey | N/A = It's NOT ON THE PROPERTY and doesn't apply**

Item	Yes	No	N/A
Range (Oven & Cooktop): <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas <span style="font-size: small;">----- OR -----</span>	<input checked="" type="checkbox"/>		
Wall Oven(s): <input type="checkbox"/> Electric <input type="checkbox"/> Gas <span style="font-size: small;">----- AND -----</span>	<input checked="" type="checkbox"/>		
Cooktop: <input type="checkbox"/> Electric <input type="checkbox"/> Gas	<input checked="" type="checkbox"/>		
Refrigerator with Freezer	<input checked="" type="checkbox"/>		
Microwave Oven	<input checked="" type="checkbox"/>		
Dishwasher	<input checked="" type="checkbox"/>		
Disposal			<input checked="" type="checkbox"/>
Water Softener   Purifier <input type="checkbox"/> Owned <input type="checkbox"/> Leased			<input checked="" type="checkbox"/>
Bar Refrigerator			<input checked="" type="checkbox"/>
Separate Refrigerator   Freezer   Stand Alone Ice Maker			<input checked="" type="checkbox"/>
Wine Cooler			<input checked="" type="checkbox"/>
Compactor			<input checked="" type="checkbox"/>
Washer	<input checked="" type="checkbox"/>		
Dryer: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas	<input checked="" type="checkbox"/>		
Chandelier/Hanging Lamp Qty ____			<input checked="" type="checkbox"/>
Ceiling   Paddle Fan Qty ____	<input checked="" type="checkbox"/>		
Sconce(s): Qty ____			
Draperies: Qty ____ Rods: Qty ____	<input checked="" type="checkbox"/>		
Plantation Shutters: Qty ____			<input checked="" type="checkbox"/>
Shades   Blinds: Qty ____	<input checked="" type="checkbox"/>		
Mirrors   Location:	<input checked="" type="checkbox"/>		
Fireplace(s) Qty ____ <input checked="" type="checkbox"/> Wood Burning <input type="checkbox"/> Gas <input type="checkbox"/> Both	<input checked="" type="checkbox"/>		
Boat Lift: Weight ____ Davits: <input type="checkbox"/> Electric <input type="checkbox"/> Manual			<input checked="" type="checkbox"/>
Appliances Leased Describe:			<input checked="" type="checkbox"/>
Pool Table   Game Table			<input checked="" type="checkbox"/>

Item	Yes	No	N/A
Water Heater(s): Qty ____ <input type="checkbox"/> Tankless <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Electric	<input checked="" type="checkbox"/>		
Generator: <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Natural Gas			<input checked="" type="checkbox"/>
Storm Shutters   Panels: <input type="checkbox"/> Electric <input type="checkbox"/> Manual <input type="checkbox"/> Both	<input checked="" type="checkbox"/>		
Awnings: <input type="checkbox"/> Electric <input type="checkbox"/> Manual			<input checked="" type="checkbox"/>
Propane Tank: <input type="checkbox"/> Owned <input type="checkbox"/> Leased			<input checked="" type="checkbox"/>
Central Vac System   Equip + Accessories			<input checked="" type="checkbox"/>
Security Gate Remotes(s): Qty ____			<input checked="" type="checkbox"/>
Garage Door Opener(s): Qty ____	<input checked="" type="checkbox"/>		
Garage Door Remote(s): Qty ____	<input checked="" type="checkbox"/>		
Smart Doorbell			<input checked="" type="checkbox"/>
Smart Thermostat(s) Qty ____			<input checked="" type="checkbox"/>
Summer Kitchen Grill			<input checked="" type="checkbox"/>
Pool: <input type="checkbox"/> Salt <input type="checkbox"/> Chlorine			<input checked="" type="checkbox"/>
Pool Heater: <input type="checkbox"/> Gas <input type="checkbox"/> Elec <input type="checkbox"/> Solar			<input checked="" type="checkbox"/>
Hot Tub   Spa: Heated: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Pool Cleaning Equipment			<input checked="" type="checkbox"/>
Pool - Child Fence   Barrier			<input checked="" type="checkbox"/>
Storage Shed			<input checked="" type="checkbox"/>
Potted Plants   Lawn Ornaments   Fountains			<input checked="" type="checkbox"/>
Intercom	<input checked="" type="checkbox"/>		
TV's: Qty ____ TV Mounts: Qty ____			<input checked="" type="checkbox"/>
Security System: <input type="checkbox"/> Owned <input type="checkbox"/> Leased Cameras: <input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
Surround Sound (With Components) Speakers: <input type="checkbox"/> Yes <input type="checkbox"/> No			<input checked="" type="checkbox"/>
Satellite Dish   TV Antenna <input type="checkbox"/> Leased <input type="checkbox"/> Owned			<input checked="" type="checkbox"/>
Other   Notes:			

Seller 1: *John C. Nadeau* Date: *2-19-26* Buyer 1: \_\_\_\_\_ Date: \_\_\_\_\_  
 Seller 2: *Joanne Nadeau* Date: *2-19-26* Buyer 2: \_\_\_\_\_ Date: \_\_\_\_\_



**FREQUENTLY ASKED QUESTIONS**

Important Information for Prospective Buyers

**Property Information**

Address: 103 TRADEWINDS TERR INDIALANTIC FL 32903		
Home Warranty: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If yes, Company   Number:	
Lawn Service   Number:	Pool Company   Number:	
Pest Company   Number:	Termite Company   Number:	Transferable Bond: Yes <input type="checkbox"/> No <input type="checkbox"/>

**Utility Information**

Trash Pick-Up Days: Mon/Thurs	Trash: Tues	Yard: Thurs	Recycle:
Approximate Utility Cost Per Month: ~	Electric: \$165.00	Gas:	Water:
Heat Source: <input checked="" type="checkbox"/> Electric <input type="checkbox"/> Gas	Water Source: <input checked="" type="checkbox"/> City Water <input type="checkbox"/> Well	Sprinkler System Runs On: <input checked="" type="checkbox"/> Well <input type="checkbox"/> City <input type="checkbox"/> Reclaimed	
Plumbing Source: <input checked="" type="checkbox"/> Sewer <input type="checkbox"/> Septic	Septic Location:		

**Property Specifics**

Roof Age: 4/25/2005	Heating & A/C System Age:	Water Heater Age:
Water Depth at Dock:	Waterfront Footage:	Type of Fencing:
Type of Flooring:	Type of Countertops:	
Property Features   Updates   Year: Metal Roofing Manufactured limited warranty 50 years. accordion shutters porch Impact windows except for sliders b/c of acc. shutters front door has accordion shutters		

**Are You Providing a Copy of:**

Wind Mitigation: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Four-Point Inspection: Yes <input type="checkbox"/> No <input type="checkbox"/>	Survey: Yes <input type="checkbox"/> No <input type="checkbox"/>
Insurance Declaration Page: Yes <input type="checkbox"/> No <input type="checkbox"/>	Approximate Insurance Cost Per Year: \$15,000	

Seller 1 Signature: X [Signature] E Maden Date: 2-18-2026  
 Seller 2 Signature: X [Signature] Date: 2-18-2026



**FREQUENTLY ASKED QUESTIONS**

Important Information for Prospective Buyers

**Property Defects**

Please list any items on the property that are not working and/or are defective (e.g. pool light does not turn on, ice maker does not work, etc.)

Primary jacuzzi pump

Seller 1 Signature: John C. Kessel

Date: 2-18-26

Seller 2 Signature: [Signature]

Date: 2-18-26

